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Abstract 526

TITLE: Patterns of Male Condom and Spermicide Use in a Follow-Up Study of Women at Risk

for STD

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OBJECTIVES: To evaluate male condom and vaginal spermicide use among a group of urban women at risk of sexually transmitted disease (STD). To compare the socio-demographic characteristics and sexual histories of women with different patterns of barrier use during the study.

METHODS: The data come from a prospective study of barrier contraceptive efficacy. At baseline women received an intensive behavioral intervention promoting male condom and spermicide use. Frequency distributions and univariate statistics were employed for preliminary analyses. Contingency table analyses were used to evaluate associations between barrier choice and baseline characteristics.

RESULTS: A total of 760 women returned for at least one follow-up visit, returned at least one sexual diary, and reported at least one act of vaginal intercourse. During the study, 395 (52%) used the male condom only, 16 (2%) used spermicide only, 46 (6%) used male condoms and spermicide together during all protected acts, 286 (38%) of women mixed male condom and spermicide use (i.e., they may have alternated between using the male condom only, spermicide only, or the male condom and spermicide jointly), and 17 (2%) used no barrier. The proportion of women who used the male condom exclusively increased during follow-up from 54% at the first visit to 60% at the sixth visit, as did the proportion using spermicide exclusively (4% to 6%). The proportion of women who mixed male condom and spermicide use declined from 23% at the first visit to 8% at the sixth visit. Simultaneous male condom and spermicide use declined slightly (15% to 13%). The proportion of women reporting unprotected intercourse increased from 4% to 13%. Consistent use (i.e., use of a barrier at every act during follow-up) was most commonly achieved using male condoms exclusively (59%), followed by mixing male condom and spermicide use (28%), using the male condom and spermicide simultaneous (12%), and using spermicide exclusively (0.7%). In comparison to those who used only male condoms, the 332 women who used both male condoms and spermicide were typically older (p= 0.03) and African American (p=0.02). They also reported a greater number of lifetime partners (p=0.05), were more likely to have reported a past pregnancy (p=0.04), and were less likely to be using male condoms at baseline (p=0.02).

CONCLUSIONS: A substantial proportion of women used both male condoms and vaginal spermicide during the study. Mixed male condom and spermicide use may increase consistent barrier use among at-risk women, leading to a reduced incidence of the curable STDs linked to HIV infection.

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